APPLICATION FOR UNITED STATES PATENT Declaration and Power of Attorney

As a below named inventor, I hereby declare that:

my residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original first and sole inventor (if only one name is listed below) or an original first and joint inventor

OE	(if plural nar	mes are listed	below) of the	subject matter w	hich is claimed an	d for which a pat	ent is sought on the i	entitled:	
1	ms e	BATHI	NG AID						
THE OF	Check one	nd claimed in	the specification	on:					
TENT &	TRADE	*a. □ attach b. □ filed o		as Appl	ication Serial No.		and amended on		
	amended by I ackn accordance	any amendmowledge the with Title 37	ent referred to duty to disclos , Code of Fe	above. se information of deral Regulation:	which I am awar	e which is materi ler Title 35, U.S	ial to the examination. Code § 119, the p	(if applicable) cluding the claims, as n of this application in riority benefits of the	
		Japar	ese Pate	nt Applicatio	on No. 2002-	244662 file	d August 26, 2	002	
		merica either	-					foreign to the United above-named foreign	
2	If there are r insert "NON	•	ling applicatio	ons,	NONE				
	I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:								
	James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg: No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411 and Edward P. Walker, Reg. No. 31,450. ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.								
	I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of mown knowledge are true and that all statements made on information and belief are believed to be true; and further that thes statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, of both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
3	Typewritten of Sole or Fi	Full Name irst Inventor	O:	ISAFU en Name	Mid	dle Initial	NOF Family	RO V Name	
**4	Inventor's S	ignature	→	Masaru	Noro				
**5	Date of Sign	nature	→		5.	2003		Year	
6	Residence _		origuchi-sl		saka_ te or Province	Day	JAPAN Country	Year	
7	Citizenship		oanese						
8	(Post Office A (Insert complete address, include	e mailing		nyo Electric ıchi-shi, Osa		<u>-5, Keihanhond</u> 7. JAPAN	dori 2-chome,	

^{*}This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

^{**}Note to Inventor: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5. IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE 🗵

PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

3	Typewritten Full Name of	Masafumi		NISHINO			
	Second Joint Inventor (if any)	Given Name	Middle Initial	Family Name			
*4	Inventor's Signature →	Masafumi		Nishino			
*5	Date of Signature →	R	<u></u>	2003			
,	Date of Signature	Month	. Day	Year			
*6	Residence Moriguchi-shi	Osaka		JAPAN			
	City	State or Province		Country			
*7	Citizenship Japanese						
8	Post Office Address (Insert complete mailing	c/o Sanyo Electric Co., Ltd., 5-5, Keihanhondori 2-chome,					
	address, including country)	Moriguchi-shi, Osaka 570-8677, JAPAN					
3	Typewritten Full Name of	Tetsunari		HAMADA			
	Third Joint Inventor (if any)	Given Name	Middle Initial	Family Name			
*4	Inventor's Signature →	Tetsunari		Hamada			
*5	Date of Signature →	8	7	2003			
J	Date of Signature	Month	Day	Year			
*6	Residence Moriguchi-shi City	Osaka	1	JAPAN			
		State or F	Province .	Country			
7	Citizenship <u>Japanese</u>						
8	Amant complete mailing	c/o Sanyo Electric Co., Ltd., 5-5, Keihanhondori 2-chome,					
	address, including country)	Moriguchi-shi, Osaka 570-8677, JAPAN					
3	Typewritten Full Name of						
,	Fourth Joint Inventor (if any)	Given Name	Middle Initial	Family Name			
*4	Inventor's Signature →						
*5	Date of Signature →		· .				
		Month	Day	Year			
*6	Residence City .	State or Province					
*7	City .		rovince	Country			
*7							
8	Post Office Address (Insert complete mailing address, including country)						
•	T W B HAL G						
3	Typewritten Full Name of Fifth Joint Inventor (if any)	Given Name	Middle Initial	Family Name			
	That some inventor (if tary)	Given Name	Wilder Miller	i anny ivanie			
*4	Inventor's Signature →						
*5	Date of Signature →						
	-	Month	Day	Year			
*6	Residence						
*~	City	State or F	rovince	Country			
*7	Citizenship						
8	Post Office Address (Insert complete mailing address, including country)						

^{*}Note to Inventors: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5. This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.